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PTO/SB/02A (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.**DECLARATION****ADDITIONAL INVENTOR(S)
Supplemental Sheet**Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Ben T.				Sommers			
Inventor's Signature	✓					Date	✓
Residence: City	Golden	State	CO	Country	USA	Citizenship	USA
Post Office Address	260 Dekker Drive						
Post Office Address							
City	Golden	State	CO	ZIP	80401	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
David J.				Paul			
Inventor's Signature	✓ <i>David J. Paul</i>					Date	23 May 2001
Residence: City	Fremont	State	CA	Country	USA	Citizenship	USA
Post Office Address	48620 Spokane Court						
Post Office Address							
City	Fremont	State	CA	ZIP	94539	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Michael				Pearson			
Inventor's Signature	✓					Date	✓
Residence: City	Norwich	State	VT	Country	USA	Citizenship	USA
Post Office Address	31 Hawk Pine						
Post Office Address							
City	Norwich	State	VT	ZIP	05055	Country	USA

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

MAY 22 2001 11:15 FR BUCHOLTZ & BULL PC 303 778 0070 TO 1010288160376147 P.02/02

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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	Sam Alexander
Title	METHOD AND APPARATUS FOR FACILITATING RELOCATION
Group Art Unit	
Examiner Name	
Attorney Docket Number	DN 1431

I hereby appoint:

☒ Practitioners at Customer Number

26483 →

Place
Number
Label here

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Inresco Portfolios, Ltd. d/b/a BHIF Group

Signature

Sam Alexander, President

Date

May 22, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ Total of 1 forms are submitted.

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MAY 21 2001 14:23 FR BUCHOLTZ & BULL PC 303 778 0070 TO 1010288160376147 P.02/12

PTO/SB/01 (03-01)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing
OR
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

DN 1431

First Named Inventor

Sam Alexander et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR FACILITATING RELOCATION

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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PTO/SB/01 (03-01)

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ XCustomer Number
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OR ☐

Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :



A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

Sam

Family Name
or Surname

Alexander

Inventor's
Signature

Date

5/21/01

Residence: City Lebanon

New
State Hampshire

Country USA

Citizenship USA

Mailing Address 23 Old Kings Highway

City Lebanon

New
State Hampshire

ZIP 03766

Country USA

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

George

Family Name
or Surname

Spitzer

Inventor's
Signature

Date

5/21/01

Residence: City Etna

New
State Hampshire

Country USA

Citizenship USA

Mailing Address 393 Hanover Center Road

City Etna

New
State Hampshire

ZIP 03750

Country USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

MAY 21 2001 14:24 FR BUCHOLTZ & BULL PC 303 778 0070 TO 1010288160376147 P.04/12

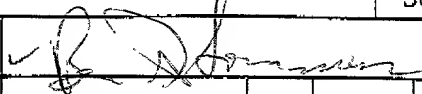

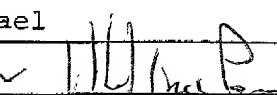
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 1 of 1

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Given Name (first and middle (if any))				Family Name or Surname			
Ben T.				Sommers			
Inventor's Signature				Date		5/22/0	
Residence: City		Golden		State		CO	
				Country		USA	
Post Office Address		260 Dekker Drive					
Post Office Address							
City		Golden		State		CO	
				ZIP		80401	
				Country		USA	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
David J.				Paul			
Inventor's Signature				Date			
Residence: City		Fremont		State		CA	
				Country		USA	
Post Office Address		48620 Spokane Court					
Post Office Address							
City		Fremont		State		CA	
				ZIP		94539	
				Country		USA	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Michael				Pearson			
Inventor's Signature				Date		2/1/04	
Residence: City		Norwich		State		VT	
				Country		USA	
Post Office Address		31 Hawk Pine					
Post Office Address							
City		Norwich		State		VT	
				ZIP		05055	
				Country		USA	

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